



# CASH RECEIPTS MONETARY CONTRIBUTIONS

# C3

(1/02)

**THIS SPACE FOR OFFICE USE**

100992731

08-19-2020

Candidate or Committee Name (Do not abbreviate. Use full name.)

(Friends of Justin Raffa)

Mailing Address

PO Box 1815

City

Richland, WA

Zip + 4

99352

Office Sought (candidates)  
COUNTY COMMISSIONER

Election Date

2020

## 1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous .....		\$ 30 . 00
	b. Candidate's personal funds deposited in the bank (include candidate loans in 1c) .....		
	c. Loans, notes, security agreements. Attach Schedule L .....		
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation .....		
	e. Small contributions \$25.00 or less not itemized and number of persons giving (persons)		

## 2. CONTRIBUTIONS OVER \$25.00

Date Received	Contributor's Name, Address, City, State, Zip	Contributions of more than \$100: Employer's Name, City and State	P R I	G E N	Amount	Aggregate* Total
08/14/20	SARA ELLINGSON 203 GREENVIEW DR RICHLAND, WA 99352			X	\$50.00	\$50.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Sub-total			\$50.00	
		Amount from attached pages			\$0.00	
	<input type="checkbox"/> Check here if additional pages are attached					*See reverse

## 3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT

Sum of parts 1 and 2 above. Enter this amount in line 1, Schedule A to C4.

4. Date of Deposit

08/18/20

Treasurer's Daytime Telephone No.: (509) 554-7208

I certify that this report is true and complete to the best of my knowledge

Treasurer's Signature

Date \_\_\_\_\_

Skype White

08-19-2020